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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

reapplication of: Gil Ben-Menachem et al.

Filed: September 27, 2005

For: CHOLESTEROL-CONTAINING

For: CHOLESTEROL-CONTAINING COMPOUNDS AND THEIR USE AS

IMMUNOGENS AGAINST BORRELIA BURGDORFERI

Examiner: To be assigned

Art Unit: 1636

Attorney Reference No.: 4239-68220-03

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CERTIFICATE OF MAILING

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Attorney or Agent Munch Rugust

Date Mailed August 31, 2006

INFORMATION DISCLOSURE STATEMENT PURSUANT TO 37 C.F.R. § 1.97(b)(3)

Listed on the accompanying form PTO-1449 and enclosed herewith are several English-language and/or non-English-language documents. Applicants respectfully request that these documents be listed as references cited on the issued patent.

Applicants filed this Information Disclosure Statement ("IDS") before the mailing date of a first Office action on the merits. As a result, no fee should be required to file this IDS.

However, if the Patent Office determines that a fee is required for Applicants to file this IDS, please charge any such fees, or credit overpayment, to Deposit Account No. 02-4550. A duplicate copy of this Information Disclosure Statement is enclosed.

The filing of this IDS shall not be construed to be an admission that the information cited in the statement is, or is considered to be, prior art or otherwise material to patentability as defined in 37 C.F.R. §1.56.

Respectfully submitted,

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э.		Attorney Docket Number	4239-68220-03
		Application Number	10/550,907
INFORMATION DISCLOSURE STATEMENT		Filing Date	September 27, 2005
		First Named Inventor	Gil Ben-Menachem
3	4	Art Unit	1636
SEP 0.5 2006 8		Examiner Name	To be assigned
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EXAMINER SIGNATURE:	DATE 03/15/2008 CONSIDERED:
* Examiner: Initial if reference considered, whether or not in	conformance with MPEP 609. Draw line through cite if not

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Examiner's Initials*	Cite No. (optional)	OTHER DOCUMENTS
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BY APPLICANT	First Named Inv

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	/Sabiha Qazi/		/Sabiha Qazi/ DATE

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Confirmation No.: 4584

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Attorney or Agent for Applicant(s)

Date Mailed August 31, 2006

TRANSMITTAL LETTER

Enclosed for filing in the application referenced above are the following:

- Supplemental Information Disclosure Statement
 Form PTO-1449 and references cited thereon
- The Director is hereby authorized to charge any additional fees that may be required, or credit over-payment, to Deposit Account No. 02-4550. A copy of this sheet is enclosed.
- Please return the enclosed postcard to confirm that the items listed above have been received.

Respectfully submitted,

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